

CANDIDATE'S STATEMENT OF ORGANIZATION AND DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE



State Form 4604 (R15 / 5-19) Indiana Election Division (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. SEE INSTRUCTIONS ON REVERSE SIDE.

Asher Asher Jerry Len State zip Code in Address (number and street, city, state, and zip code) Kokomo in Address (number and street, city, state, and zip code) State zip Code in Address (number and street, city, state, and zip code) State zip Code in Address (Optional) Asherforsheriff@gmail.co (a) State zip Code in Address (Optional) Asherforsheriff@gmail.co (b) State zip Code in Address (Optional) Asherforsheriff@gmail.co (c) State zip Code in Address (Optional) Asherforsheriff@gmail.co (c) State zip Code in Address (Optional) Asherforsheriff@gmail.co (c) State zip Code in Address (Include district number, if any. Not required for an explorate Sheriff of Howard County Section B. Committee (Do not abbreviate.) Check if this is a new name. Committee to Elect Jerry Asher for Howard County Sheriff 14. Mailing Address (number and street, city, state, and zip code) Check if this is a new address. 15. FAX (Optional) 16. E-mail Address (Optional) 20. Committee Organiza 20. Com	pal Committee nittee om n) tory committee.
Asher 4. Mailing Address (number and street, city, state, and ZIP code) 5. FAX (Optional) 6. E-mail Address (Optional) 7. City 8. County 9. Telephone (Day) 7. City Seas-7453 7. City Seas-7453 7. City State In all applicable boxes as fully and accurately as possible. 7. City State In all applicable boxes as fully and accurately as possible. 7. City State In Sta	pal Committee nittee om n) tory committee. om tion Date
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4. Mailing Address (number and street, city, state, and ZIP code) 5677 Davis Road 7. City Kokomo IN 46901 Howard Democratic Libertarian Republican Democratic Libertarian Republican Other SECTION B. COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible. 13. Full Name of Committee (Do not abbreviate.) Committee to Elect Jerry Asher for Howard County Sheriff 14. Mailing Address (number and street, city, state, and ZIP code) Commodities (Do not abbreviate.) Check if this is a new address. 15. FAX (Optional) Sectional	om tory committee.
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Section B. Committee Information: Fill in all applicable boxes as fully and accurately as possible. 13. Full Name of Committee (Do not abbreviate.) Check if this is a new name. Committee to Elect Jerry Asher for Howard County Sheriff 14. Mailing Address (number and street, city, state, and ZIP code) Check if this is a new address. State ZIP Code 18. County 19. Telephone asherforsheriff@gmail.cc Total City State ZIP Code 18. County 19. Telephone 20. Committee Organization (mm/dd/yy) 1/10/21. Chairperson's Full Name Designate Candidate as Chairperson. Check if this is a new address. State 21. Check if this is a new chairperson. Jordan Buckley 22. Mailing Address (number and street, city, state, and ZIP code) Check if this is a new address. State Coptional) 24. E-mail Address (Optional)	om tion Date
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22. Mailing Address (number and street, city, state, and ZIP code)	
25. City State ZIP Code 26. County 27. Telephone (Day) 28. Telephone (Evening	3)
Greentown IN 46936 Howard ,765, 432-1366 ,765, 432-1366	Land
29. Bank or Other Depositories (List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintain.	s funds.)
Community First Bank	profesional for
30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only.) 31. Salaries and Reimbursements (Will the committee pay the candi	date a salary o
reimbursement for lost wages? If Yes, attach a copy of the contract.)	Yes N
SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14)	
32. I, as Chairperson of the foregoing Person Appointed Treasurer Signature of the Committee Chairperson	
committee, appoint the following person as	
Treasurer of the Committee. 33. Treasurer's Full Name Designate candidate as treasurer. Check if this is a new treasurer.	
Ronal J. Metz	4 10
34. Mailing Address (number and street, city, state, and ZIP code) Check If this is a new address. 35. FAX (Optional) 36. E-mail Address (Optional)	
2336 West Boulevard Street rmetz@bmmcpas.com	
37. City State ZIP Code 38. County 39. Telephone (Day) 40. Telephone (Evenin	a)
Kokomo IN 46902 Howard ,765, 236-2300 ,	
SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)	DESIGNATION OF THE PERSON OF T
41. I give notice that I accept the duties and responsibilities of Treasurer of this Signature of Person Accepting Appointment	
Committee. I am not the chairperson of a campaign finance committee (except as	
permitted for a candidate committee under IC 3-9-1-7). SECTION E. CERTIFICATION OF STATEMENT FOR OFFICE US	EONLY
We certify as the candidate and the duly appointed Chairperson of the Committee and that we have	EUNLI
examined this statement. To the best of our knowledge and the life it is true, correct and complete.	= D
42. Typed or Printed Name of Chairperson Signature of Chairperson Date (mm/dd/yy)	
Jordan Buckley 1/4/22 114/22	100
43. Typed or Printed Name of Candidate Signature of Candidate Date (mm/dd/yy)	L
9 1 1 1	ART
Clerk Howard Super	
Warning: State law requires that any change in this information be reported within ten (10) days of the change (IC 3-9-1-10). A person who knowingly files a fraudulent report commits a Level 6 D felony (IC 3-14-1-13). A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be	





STATEMENT OF ECONOMIC INTERESTS FOR LOCAL AND SCHOOL BOARD OFFICES

State Form 55128 (R / 8-19) Indiana Election Division (IC 3-8-9)

INSTRUCTIONS: This statement must be filed with a candidate's: (1) declaration of candidacy for nomination at a primary or town party convention; (2) certificate of nomination by a Libertarian Party convention; (3) petition of nomination as a school board candidate; (4) petition of nomination as a minor party or independent candidate; (5) declaration of intent to be a write-in candidate; or (6) certificate of candidate selection to fill an early or late vacancy on a general or municipal election ballot. This statement must also be filed no later than noon 60 days after an individual assumes a vacant local office. NOTE: A candidate who files a petition of nomination for an office in a county that has a separate voter registration board from the circuit court clerk's office must file this statement with the petition of nomination after the petition has been certified by the voter registration board and when it is presented for filing with the office described in IC 3-8-2-6.

STATE OF INDIANA COUNTY OF Howard

	INFORMATION FOR THE CALENDAR YEAR BEFORE THE DATE OF THIS FILING LED
OTE:	nsert "Not Applicable" where appropriate.
	JAN 0 5 2022 Jerry Len Asher the undersigned, certify the following:
V4000	Name of Candidate or Person Filling Vacant Office DEBBIE STEWART Clerk Howard Superior Court
(1)	The elected office which I seek as a candidate, or to which I have been appointed to fill a vacancy is
	Sheriff of Howard County (Include district, if applicable.
(2)	The name of my spouse was Robin R. Asher
(3)	The name of my employer and the nature of its business was Howard County Sheriff's Office, law enforcement
(4)	The name of the employer of my spouse and the nature of its business was Bowe Digital, marketing
(5)	If I owned a sole proprietorship, the name of the sole proprietorship and the nature of its business was Not applicable
(6)	If I operated a professional practice, the name of the professional practice and the nature of its business was Not applicable
(7)	If I was a member of a partnership, the name of the partnership and the nature of its business was Not applicable
(8)	If my spouse was a member of a partnership, the name of the partnership and the nature of its business was Not applicable
(9)	If I was a member of a limited liability company, the name of the limited liability company and the nature of its business was Not applicable
(10	If my spouse was a member of a limited liability company, the name of the limited liability company and the nature of its business was Not applicable
(1	If I was an officer or a director of a corporation (other than a church), the name of the corporation and the nature of its busine was Not applicable
(1:	If my spouse was an officer or a director of a corporation (other than a church), the name of the corporation and the nature of its business was Not applicable
	COMPLETE THE AFFIRMATION ON REVERSE SIDE OF THIS FORM.

f, the undersigned, affirm that the information s	et forth on this Statement of Economic Interests	s is true and complete.	
Signed, this the 3 day of Janaq	. 2022:		
Our la Pal.			
Signar re			
Jerry Len Asher			
Printed Name			
STATE OF Indiana)		
COUNTY OF HO ward	- 1 m		
Subscribed and affirmed to before me this	s 3rd day of January	, 20 <u>22</u>	SEAL)
Notary Public or Other Official Administer	A 100005		
My Commission expires (applies only to No	tary Public): Cyrul 18, 2025		ANGELA K BANUSH
County of Residence: Howard			NOTARY PUBLIC STATE OF INDIANA MMISSION NUMBER 699373 commission Exps. April 18, 2025



State Form 46439 (R20 / 8-21) Indiana Election Division (IC 3-8-2-7)

INSTRUCTIONS: This form is used by an individual who is seeking the Democratic or Republican party nomination to an elected office in a primary election. A declaration of candidacy must be filed not earlier than January 5, 2022 and not later than NOON, February 4, 2022. Please print or type all information on this form except all signatures. SEE IMPORTANT INFORMATION ON BACK OF FORM. Candidates seeking the office of U.S. Senator in a primary election also file CAN-4 forms. All candidates seeking a primary nomination for a LOCAL office (other than circuit, probate, or superior court judge, or prosecuting attorney) must also file the CAN-12 form WITH this form.

OUNTY OF HOWARD		JAN 0 5 20	122	
	GENERAL INFORMATION	DEBBIE STEW		
Jerry Len Asher		Clerk Howard Super , the undersigned, certify the follow		
Name of Candidate		_, the undersigned, certify the rollow	ang.	
(1) I am a registered voter of Precinct B	of the Township of Clay			
(or of Ward, if applicable, of the City or State of Indiana.	Town of,) Cou	_{inty of} Howard		
(2) I request that my name be placed on the official primary ballot of the <i>(check one)</i> ☐ Democratic Party or ■ Republican with which I am affiliated to be voted on at the primary election to be held on May 3, 2022, for the office of				
Sheriff of Howard County	District	(if	fany).	
Name of Office			S., , ,	
party I voted for in the last two primary elections requirement I must obtain and file with this decl	s in Indiana in which I voted. I understand t laration a certificate from the appropriate co			
requirement I must obtain and file with this decl I am a member of this political party. I meet the ☑ The two most recent primary elections in Ir affiliation above. ☐ The county chairman of the county in which	laration a certificate from the appropriate con requirement to be affiliated with the political region of the primaries	ounty chairman of the party indicating all party indicated because: (check of held by the party with which I claim which I claim affiliation above, has cert	ng that one)	
requirement I must obtain and file with this decl I am a member of this political party. I meet the ☑ The two most recent primary elections in Ir affiliation above. ☐ The county chairman of the county in which	laration a certificate from the appropriate or requirement to be affiliated with the political indiana in which I voted were the primaries th I reside, and of the political party with what I have attached a copy of the county chairs for federal office.) I comply with all requires ag any applicable residency requirement. I a	ounty chairman of the party indicatinal party indicated because: (check of held by the party with which I claim with I claim affiliation above, has cert man's certification to this form.) ments under the laws of the State of	ng that one) tified	
requirement I must obtain and file with this decl I am a member of this political party. I meet the The two most recent primary elections in Ir affiliation above. The county chairman of the county in which that I am a member of the political party. (I (4) (This paragraph does not apply to a candidate Indiana to be a candidate for this office includin due to a criminal conviction that would prohibit	laration a certificate from the appropriate or requirement to be affiliated with the political indiana in which I voted were the primaries th I reside, and of the political party with what I have attached a copy of the county chairs for federal office.) I comply with all requires ag any applicable residency requirement. I a	ounty chairman of the party indicatinal party indicated because: (check of held by the party with which I claim with I claim affiliation above, has cert man's certification to this form.) ments under the laws of the State of	ng that one) tified	
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CANDIDATE NAME INFORMATION

I request that my name appear on the primary election ballot in the following manner:

Jerry Asher

(Include any Nickname and/or Suffix, such as Jr., Sr., II, III, IV)

I also request that my name on my voter registration record be the same as the name on this declaration of candidacy. (IC 3-8-2-7(c))

The candidate's name must comply with the requirements in Indiana Code 3-5-7. If a candidate's name does not comply with this state law, the declaration may be challenged under Indiana Code 3-8-1-2. A candidate may use a nickname on the ballot only if the nickname is a name by which the candidate is commonly known and does not exceed 20 characters. A candidate may not use a title or degree as a designation or a designation that implies a title or degree. Nicknames are required to be printed on the ballot using parentheses. EXAMPLE: John R. (Jack) Doe

	CANDIDATE CERTIFICATION	ON					
statement of economic interes	(This paragraph does not apply to federal offices.) By initialing, I acknowledge that I have attached a copy of the applicable statement of economic interest statement, file stamped by the office required to receive the statement, or a receipt or photocopy of a receipt showing that this statement of economic interest has been filed. (initial here)						
) (This paragraph does not apply to a candidate for federal office or state legislative office) By initialing, I acknowledge that I might be required to file a surety bond before serving in office. (initial here)							
(9) (This paragraph does not apply for candidates for federal office, state office, or state legislative office.) By initialing, I acknowledge that I might be required to complete training or have attained certification related to service in office. (initial here)							
10) (This paragraph does not apply to a candidate for federal office.) By initialing, I acknowledge that I am aware of the provisions of the Indiana Campaign Finance Act (IC 3-9) regarding campaign finance and the reporting of campaign finance contributions and expenditures and I agree to comply with IC 3-9. (initial here) JA.							
	state, state legislative, or local office in a previous If the answer to this question is no, skip paragra						
(12) I have filed all reports require	ed by IC 3-9-5-10 for all previous candidacies: (ch	heck one) 🗹 Yes 🗆 1	No				
(13) (This paragraph only applies to a candidate for a local office, including judicial offices and prosecuting attorney, if the local office receives compensation of at least \$5,000 per year, or to a local office if the local office receives compensation of less than \$5,000 but the candidate raises or spends more than \$500.) I have filed a campaign finance statement of organization for my principal candidate's committee with the appropriate county election board OR I am aware that I may be required to file the campaign finance statement of organization not later than noon, seven (7) days after the final date to file this declaration of candidacy. (Initial here) I certify that the information in this Declaration of Candidacy is true and complete, and that I meet the specific requirements of this office.							
Our L. Oallas	01 /03 /2022	(765)863-7453	765 863-7453				
Signature Signature	Date Signed (MM/DD/YYYY)	- 1	Telephone (Evening)				
OPTIONAL INFORMATION:	SUPPRINCE NO SUPPRINCE SUP						
Candidate's email; asherforsheriff@g	amail.com Campaign	website: www.asherfors	heriff.com				
Notary Public or Other Official Admini	day of January Istering Oath according to IC 33-42-9-7	, 2022.	ANGELA K BANUSH NOTARY PUBLIC SEATE OF INDIANA COMMISSION NUMBER 699373 My Commission Exps. April 18, 2025				
My Commission expires (applies only	to Notary Public): april 18, 2025 Co.	unty of Residence: How	ara				
legislative office) or with the appropriate The candidate's committee must also fil more during the period beginning Aprill contribution is received, the candidate's A candidate's committee must file a pre legislative office) or with the appropriate The candidate's committee must also fil more during the period beginning Octol no such contribution is received, the car A person who fails to file a report with th afternoon of the final date for filing the r	CAMPAIGN FINANCE NOTICE primary campaign finance report no later than NOON, April 18, county election board (if a candidate for a local office nominate e a pre-primary supplemental report no later than forty-eight (48 9, 2022 and ending at 6:00 a.m. on May 1, 2022, with the Indicommittee is not required to file a supplemental report. election campaign finance report no later than NOON, October county election board (if a candidate for a local office). e a pre-election supplemental report no later than forty-eight (48 per 15, 2022 and ending at 6:00 a.m. November 6, 2022, with the Indiana Election Division or a county election board is subject eport being calculated as the first day, for a maximum penalty of county election board. NOTE: State legislative candidates are	a, 2022, with the Indiana Election of in the primary). By hours after the committee relana Election Division or approper 21, 2022, with the Indiana Election Division of the Indiana Election Divisio	ceives any contribution of \$1,000 or briate county election board. If no such ection Division (if a candidate for a state ceives any contribution of \$1,000 or or appropriate county election board. If each day the report is late, with the my investigative costs incurred and				
A condidate's committee must file "quarte	NOTE TO CANDIDATES FOR STATEWII		og schedule. These filings must be				
made electronically and are subject to the information.	same civil penalties set forth in the Campaign Finance Notice a	above. Contact the Campaign I	Finance Division of IED for more				
The committee must file quarterly reports (1) April 18, 2022, covering the pe (2) July 15, 2022, covering the pe (3) October17, 2022, covering the (4) November 1, 2022, covering the (5) January 18, 2023, covering the	eriod from January 1, 2022 through March 31, 2022. riod from April 1, 2022 through June 30, 2022. e period from July 1, 2022 through September 30, 2022. he period from October 1, 2022 through October 24, 2022. e period from October 25, 2022 through December 31, 2022.						
from a person that total \$1,000 or more do supplemental report.	supplemental reports with the Indiana Election Division no later uring the reporting periods listed below. If no such contribution is at: April 1, 2022, through NOON, April 18, 2022.	than forty-eight (48) hours after is received, the candidate's con	r the committee receives contributions nmittee is not required to file a				
(2) Supplemental Reporting Perio (3) Supplemental Reporting Perio	Ad: April 1, 2022, through NOON, April 16, 2022. Ad: July 1, 2022, through NOON, July 15, 2022. Ad: October 1, 2022, through NOON, October 17, 2022. Ad: October 25, 2022, through NOON, November 1, 2022.						